

# Michigan Child Care Matters

Department  
of Human  
Services

ISSUE 73, FALL 2005  
SPECIAL INVESTIGATIONS

## FROM THE DIRECTOR

As a child care provider you are responsible for the health and safety of the children in your care. Almost every day, parents in Michigan entrust over 200,000 children to you, with the expectation that while their children are with you they will be in safe hands. These expectations are realized for the vast majority of parents and children. Unfortunately, there are occasions when children are injured, either physically or emotionally, while in child care. Many times these incidents are the reason a licensing consultant will conduct a special investigation.

It is never easy to be the subject of a special investigation. Often a provider's first reaction is to demand to know who made the complaint. Regardless of the source, a licensing consultant is not at liberty to share that information with you. You may feel that your licensing consultant is out to get you by looking at a number of issues that you do not think are related to the initial reason for the investigation. But, every time a licensing consultant makes a visit to your facility, he or she is the eyes and ears of the parents who have chosen you to care for their children. Every licensing consultant knows this and takes this responsibility very seriously.

You have a right to expect to be treated fairly and courteously during the course of any investigation. The licensing consultant will always talk with you to get your perspective of the allegations. Whether an investigation confirms there were rule violations or not, the results of the investigation will be shared with you, and you will receive a written report of the findings of the special investigation.

Recently the Office of Children and Adult Licensing (OCAL) modified its policy for posting special investigations on the internet. A report will not be placed online when no rule violations are found, or if the allegations involved possible child abuse or neglect. OCAL has also requested the Department of Information Technology to remove reports from the internet after 2 years.

Keep in mind that special investigations are not personal attacks on you and your ability to care for children. They can be an opportunity for you to critically review your operations and make improvements to the care you provide to children. ❖

James S. Sinnamon, Director  
Division of Child Day Care Licensing

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Family Support Services  
Child Development and Care

and

MICHIGAN DEPARTMENT OF HUMAN SERVICES  
Office of Children and Adult Licensing  
Division of Child Day Care Licensing



**EDITORIAL STAFF**

**Erika Bigelow**  
Licensing Consultant

**Ann Hill**  
Licensing Consultant

**Mary Pat Jennings**  
Licensing Consultant

**Dalerie Jones**  
Licensing Consultant

**Judy Miller**  
Licensing Consultant

**Sandy Rademacher**  
Licensing Consultant

**Elaine Rauch**  
Licensing Consultant

**Sharon Schleicher**  
Licensing Consultant

**Jackie Sharkey**  
Licensing Consultant

**Kathleen Sinnamon**  
Area Manager

**Kathi Pioszak**  
Departmental Analyst  
Child Development &  
Care

This publication provides topical information regarding young children who are cared for in licensed child care settings. We encourage child care providers to make this publication available to parents of children in care, or to provide them with the web address so they may receive their own copy. All issues are available at the **Child Day Care Licensing web page**:

[www.michigan.gov/dhs](http://www.michigan.gov/dhs)  
✓ Licensing  
✓ Child Day Care

## SPECIAL INVESTIGATIONS AND DISCIPLINARY ACTIONS

Jim Sinnamon, Director  
Child Day Care Licensing Division

A special investigation is initiated when questions are raised about whether or not a child care facility is following the licensing regulations. Child day care licensing consultants will follow up on all complaints that suggest possible violations of licensing rules or Act 116, Public Acts of 1973, as amended.

Once a complaint is made and a special investigation is initiated, the licensing consultant may speak with the person making the complaint to make sure the concerns are understood. The licensee/registrant will be contacted about the concerns, and an inspection of the child care facility may occur. Depending on the allegations, staff, parents, and children in care may also be interviewed by the licensing consultant. It may also be necessary to speak with law enforcement authorities, medical personnel, and other professionals as part of the investigation.

The goal is for the consultant to complete a special investigation within 60 days. If no rule or act violations are found, the report is written and the investigation is closed. However, if violations are established, one or more of the following actions may occur:

1. The licensee/registrant may be required to develop and submit a corrective action plan that addresses the rule violations.
2. Licensing inspections may be increased to monitor the facility's compliance with the corrective action plan.
3. A license may be modified to a six-month provisional license (only for centers and group day care homes).
4. The license or certificate of registration may be revoked.

When the licensing consultant recommends disciplinary action (revocation of or refusal to renew a license), the area manager and the division director also review the investigation report. If all concur that revocation is an appropriate course of action, the Disciplinary Action Unit (DAU) becomes involved. This unit will gather, organize and assess documentary and testimonial evidence, and draft a document called a Notice of Intent. The Notice of Intent sets forth the intended licensing action, the factual basis and the specific violations that support that action, and the licensee/registrant's rights and responsibilities.

Accompanying the Notice of Intent is a Notice of Compliance Conference. If, within the specified timeframes, the licensee/registrant objects to the intended action, the DAU analyst conducts a compliance conference with the licensee/registrant and the licensing consultant.

If the compliance conference does not resolve the matter, the Notice of Intent document's second function is to be the formal charging document at the administrative hearing. The Office of Children and Adult Licensing (OCAL) files the Notice of Intent and a Request for Hearing with the Bureau of Hearings. The Bureau of Hearings sets a date for the hearing, and provides notice to all involved parties.

*(Cont'd on pg. 4)*

## **PROTECTING CHILDREN IS BEST FOR YOUR BUSINESS: KEEPING COMPLAINTS TO A BARE MINIMUM**

*Adapted from Carole Grates' article, Winter 1987 and Judy Levine's article, Spring 1997*

Jackie Sharkey, Licensing Consultant  
Macomb County

Complaints can happen to the best of providers. Living through a complaint investigation is never pleasing but there are some ways to reduce the likelihood of a complaint happening to you.

1. Be sure you are operating in compliance with licensing regulations at all times. Review licensing rules and statutes on a regular basis.
2. Keep good communication with parents.
  - a. Conduct admission interviews that encourage questions and address parents' concerns. Interview the parents and determine if they are in agreement with your operation. It is important that there be a good fit between you and the parents. Give a trial period of a minimum of two weeks to see if there is a good match. Have a parent/provider conference following the trial period to let parents know how their child is doing and to answer any questions. Then have regularly scheduled conferences throughout the year, not just when there is a problem.
  - b. Provide clearly written expectations for you and the parents. A contract or parent handbook, or both, which describes your policies, procedures, and parent responsibilities establishes the rules under which you operate. If you are already in business and do not have these tools, it is never too late to put them together. Once established, contracts and parent handbooks can be modified as events occur which were not considered earlier.
  - c. Include a statement in your contract or handbook about the termination of the relationship by either party. Don't try to be all things to all people by keeping a child longer than is healthy for either of you.
  - d. Greet the parents and children at the door when they arrive for the beginning of the day. At the end of the day, tell the parents one good thing their child did. Avoid meeting them with a list of their child's sins.
  - e. Talk with each parent daily. Let them know about the events that occurred during the day. Be tactful when discussing concerns about a child with his parents. Refrain from talking about the child in front of other children or parents. Remember information about each child is confidential.
  - f. Use good listening skills. Listen, and then listen again when parents express a concern or if something goes wrong. Be open to criticism even if you think you are right. Let parents feel that they can come to you with concerns. Consider that you might just need to make an adjustment to your program. Deal with parents' concerns the first time they are expressed. Don't wait until the third time they have told you. By that time, they are sure you have not been listening to them and are going to go to the outside with their concerns, generally to licensing.
  - g. Handle problems with parents immediately and in private. If it is a violation of your contract, put it in writing and address with the parents their responsibility to follow the agreement.
  - h. Follow your rules as outlined in your contract, parent handbook, and the licensing rules. Most complaints occur when you bend the rules or do not follow them at all.
  - i. Use newsletters and bulletin boards to keep parents informed, but do not let this replace your daily communications with parents.
3. Interview carefully and check references for anyone, volunteer or paid staff, who will have contact with children.
4. Be aware of other people entering your home or center (repairmen, visitors, teenage friends, relatives, neighbors).
5. Be respectful of and keep peace with your neighbors. Make sure that you, the children, and their parents respect your neighbors' property and possessions. Keep noise levels under control.
6. Keep a daily log of unusual incidents, accidents, injuries, and bruises that you notice when a child arrives and when they are in your care.
7. Provide parents with written as well as verbal reports of all accidents. Call the parent to let them know before they arrive at the end of the day.

*(Cont'd on pg. 4)*

### Special Investigations and Disciplinary Actions (Cont'd)

A Bureau of Hearings administrative law judge conducts the hearing. The judge listens to testimony from all involved parties. Either side may call witnesses. After the hearing is concluded, the administrative law judge reviews the testimony presented and makes a recommendation regarding the intended action (revocation or refusal to renew) to the Director of the Department of Human Services. The department director reviews the judge's recommendation and issues a Final Order.

If the final order supports revocation of the license, child care can not occur after the date of the final order. If the final order finds for the licensee/registrant, the license will continue and no further action will be taken by OCAL regarding the special investigation.

In most instances, even when the licensing consultant recommends revocation, the licensee/registrant may continue to provide care to children until the final order is issued. There is one exception. A summary suspension of a license is an emergency action taken by the Department to immediately and temporarily withdraw permission for a licensee/registrant to care for children pending the outcome of a hearing. A decision to proceed with a summary suspension is to be made in conjunction with the Division Director and the OCAL Director. Summary suspension actions are taken when children are in imminent danger and it becomes necessary to provide immediate protection to children in a regulated child care setting, or after an actual instance of harm when conditions present an ongoing danger. ❖

### Keeping Complaints To A Bare Minimum (Cont'd from pg. 3)

8. Supervise children at all times in all places (bathroom, nap room, outside).
9. Remember that your home or child care center is a business and others view you as a business operator 24 hours per day, 7 days per week. Act accordingly, even if you are not working.
10. Step back and look at your facility through the eyes of a consumer. Would you want to have a child here?

**Remember the golden rule: Treat parents and children with the same respect as you would want them to show you.❖**



## THE MICHIGAN CHILD PROTECTION LAW

*Adapted from the DHS Mandated Reporter's Resource Guide by*

Judy Miller, Licensing Consultant

Kent County

The Michigan Child Protection Law, 1975, PA 238, is an act to require the reporting of child abuse and neglect by certain persons, and to permit the reporting of child abuse and neglect by all persons. It includes the legal requirements for reporting, investigating, and responding to child abuse and neglect cases.

For copies of the child protection law contact your local DHS office or go to <http://www.michigan.gov/dhs>. Click on Protective Services under the "Quick Links" on the right, then click on Child Protection Law under the "Protective Services Quick Links" on the right.

### Responsibility of Mandated Report

**The law requires that mandated reporters report suspected child abuse and neglect to the Department of Human Services (DHS).** The report must be made directly to DHS. There are civil and criminal penalties for a mandated reporter's failure to make a report. Likewise, there is civil and criminal immunity for someone making a report in good faith.

### Who Are Mandated Reporters?

Mandated reporters are an essential part of the child protection system since they have an enhanced capacity, through their expertise and direct contact with children, to identify suspected child abuse/neglect. Complaints referred by mandated reporters are confirmed at nearly double the rate of those referred from non-mandatory reporters. The list of mandated reporters is as follows:

"A physician, dentist, physician's assistant, registered dental hygienist, medical examiner, nurse, person licensed to provide emergency medical care, audiologist, psychologist, marriage and family therapist, licensed professional counselor, certified social worker, social worker, social work technician, school administrator, school counselor, or teacher, law enforcement officer, member of the clergy or **regulated child care provider**." (emphasis added)

### Reporting Obligations of Mandated Reporters

Mandated reporters must make an immediate verbal report to DHS upon suspecting child abuse or neglect, followed by a written report within 72 hours. The reporter is not expected to investigate the matter, know the definitions of child abuse and/or neglect used in judicial proceedings, or even know the name of the perpetrator. The Child Protection Law is intended to make reporting simple and places responsibility for determining appropriate action with Children's Protective Services (CPS). CPS is a division of the Department of Human Services (DHS). The authority and actions of CPS are based on requirements in the Child Protection Law.

*Reporting the suspected allegations of child abuse and/or neglect to your agency administrator does **not** fulfill the mandated requirement to report directly to DHS.*

### What should the oral report include?

The information in a CPS report needs to be provided by the individual who actually has observed the injuries or had contact with the child regarding the complaint. Contact the DHS county office where the child currently resides and indicate your wish to make a CPS complaint.

Intake personnel will want the following information *if available*:

- Primary caretaker (parent and/or guardian) name and address.
- Names and identifying information for all household members, including the victim and alleged perpetrator, if known.
- Birth date and race of all members of household, if known.
- Indication about whether the alleged perpetrator lives with the child.
- Current home address and the address where the alleged incident happened, if different.
- Statements of the child's disclosure and context of the disclosure. For example, was the child asked about the injury or did he/she volunteer the information.
- History of the child's behavior.
- Why you suspect the child is being abused and/or neglected.

*(Cont'd on pg. 6)*

## The Michigan Child Protection Law (Cont'd from pg. 5)

### Definitions of Child Abuse/Neglect

#### Physical abuse

Physical abuse is a non-accidental injury to a child by the person responsible for the child's health and welfare. Physical abuse may include, but is not limited to, burning, beating, kicking, and punching. It is usually the easiest abuse to identify because of the physical evidence of bruises, burns, broken bones or other unexplained injuries. Internal injuries may not be readily apparent.

#### Neglect

Neglect is the most frequently reported and confirmed form of child abuse. Child neglect means harm or threatened harm to a child's health or welfare by a caretaker through failure to provide adequate shelter, food, clothing, or medical care. Additionally, a caretaker placing a child at risk or failing to protect a child from known risk or potential risk of harm is considered to be neglect. The caretaker must eliminate, or intervene to eliminate, the risk to a child when that person is able to do so.

#### Sexual Abuse

Sexual abuse means engaging in sexual contact with a child as described in the Penal Code. Additionally, sexual exploitation includes allowing, permitting, or encouraging a child to engage in prostitution or in the photography, filming or depicting of a child engaged in a sex act described in the penal code.



#### Maltreatment

Maltreatment is defined as the treatment of a child that involves cruelty or suffering that a reasonable person would recognize as excessive. Possible examples of maltreatment are:

- A parent, who knowing that their child has a phobia or deep fear of dark closed places, utilizes locking the child in a closet as a means of punishment.
- A parent who forces their child to eat dog food out of a dog bowl during dinner as a method of punishment and/or humiliation.
- A parent who is found to be teaching their child how to be an accessory in their criminal activities, e.g., shop-lifting.

***If you suspect abuse and/or neglect to a child by someone other than a parent or guardian/caretaker, contact law enforcement and follow established protocols of your organization or contact CPS and CPS will forward complaints to law enforcement as required by law. See CPS Contact Numbers by County on page 11.***

#### Confidentiality

Strict confidentiality laws at both the state and federal level govern Children's Protective Services investigations. This includes protection of the identity of the reporting person unless the reporting person provides permission to release their identity or, the release of their identity is ordered through judicial process. Release of any information contained in a child abuse/neglect investigation is done in accordance with the Child Protection Law in the manner prescribed by the law. Mandated reporters should know that the reporting source is kept confidential by all staff and cannot be disclosed without a court order. The alleged perpetrator may infer from the information in the report who made the referral, and confront mandated reporters; however, CPS will not disclose the reporting source.

*(Cont'd on pg. 7)*

## The Michigan Child Protection Law (Cont'd from pg. 5)

**Indicators of Child Abuse/Neglect**

Determining when to report situations of suspected child abuse/neglect is difficult for mandated reporters. When in doubt, contact your DHS/CPS office for consultation. Below are some of the commonly accepted physical and behavioral warning signs associated with various forms

of child abuse and/or neglect. Physical and behavioral indicators, in themselves, are not the only indicators of child abuse/neglect. A child's statement of alleged child abuse/neglect may also be useful in establishing "reasonable cause" to suspect child abuse/neglect. ❖

<b>Physical Indicators</b>		<b>Behavioral Indicators</b>
<b>Physical Abuse</b>	<ul style="list-style-type: none"> <li>• Bruises more numerous in number than expected from explanation of incident.</li> <li>• Unexplained bruises (in various stages of healing), welts, loop marks.</li> <li>• Adult/human bite marks</li> <li>• Bald spots or missing clumps of hair.</li> <li>• Unexplained burns/scalds.</li> <li>• Unexplained fractures, skin laceration/punctures or abrasions.</li> <li>• Swollen lips/chipped teeth.</li> <li>• Linear/parallel marks on cheeks and temple area.</li> <li>• Crescent shaped bruising caused by pinching.</li> <li>• Puncture wounds that resemble distinctive objects.</li> <li>• Bruising behind the ears.</li> </ul>	<ul style="list-style-type: none"> <li>• Self-destructive/self mutilation.</li> <li>• Withdrawn and/or aggressive-behavior extremes.</li> <li>• Uncomfortable/skittish with physical contact.</li> <li>• Arrives at school late.</li> <li>• Expresses fear of being at home.</li> <li>• Chronic runaway (adolescents).</li> <li>• Complains of soreness or moves uncomfortably.</li> <li>• Wears clothing inappropriate to weather, to cover body.</li> <li>• Lack of impulse control (e.g. Inappropriate outbursts).</li> </ul>
<b>Physical Neglect</b>	<ul style="list-style-type: none"> <li>• Unattended medical needs.</li> <li>• Lack of supervision.</li> <li>• Consistent signs of hunger, inappropriate dress, poor hygiene.</li> <li>• Distended stomach, emaciated.</li> <li>• Massive weight change.</li> </ul>	<ul style="list-style-type: none"> <li>• Regularly displays fatigue or listlessness, falls asleep in class.</li> <li>• Steals, hoards or begs food.</li> <li>• Reports that no caretaker is at home.</li> </ul>
<b>Sexual Abuse</b>	<ul style="list-style-type: none"> <li>• Pain or itching in genital area.</li> <li>• Bruises or bleeding in genital area.</li> <li>• Venereal disease.</li> <li>• Frequent urinary or yeast infections.</li> <li>• Massive weight change.</li> <li>• Pregnancy 12 years or under.</li> </ul>	<ul style="list-style-type: none"> <li>• Withdrawn, chronic depression.</li> <li>• Sexual behaviors or references that are unusual for the child's age.</li> <li>• Seductive or promiscuous behavior.</li> <li>• Poor self-esteem, self-devaluation, lack of confidence.</li> <li>• Suicide attempts.</li> <li>• Hysteria, lack of emotional control.</li> <li>• Habit disorders (sucking, rocking).</li> </ul>

## PARENTS & PROVIDERS AS PARTNERS

Ann Hill, Licensing Consultant  
Eaton County

A young child's strongest ties are to his family and teachers. The most important aspects of learning take place within a supportive and cooperative parent-provider-child relationship. Forming a partnership with parents involves a respect for the uniqueness and special needs of each family. Parents support this partnership by following the facility's policies, goals and operating procedures.

Responsibility for initiating, building and nurturing this relationship and keeping the channels of communication open falls on the child care provider.

The following are some guidelines for communicating with parents:

- Provide a non-threatening environment where the parents can feel safe.
- Provide opportunities for parents to honestly express feelings, ideas and concerns, no matter how trivial they seem.
- Value parents' comments and suggestions. They know their child best.
- Be a good listener.
- Help parents enjoy their child's unique qualities by sharing the highlights of his day.
- Maintain a supportive, optimistic attitude during the times when parents are worried about their child's development.
- Take every opportunity to learn from parents and to exchange information.

As providers you must communicate to the parent that you are an extension of their home, not a replacement. A cooperative working relationship between the parent and the home or center can be satisfying and rewarding to both and can provide an optimal learning environment for the child.

Where do you begin? The initial contact sets the tone for communication. During the initial visit the parent and child can observe the activities while the provider has an opportunity to discuss philosophy, program, policies and parental responsibilities.

An information packet or brochure containing a clear description of the policies regarding discipline, fees,

admission/withdrawal, food/nutrition and emergency procedures is a helpful tool. Clear communication at the beginning of the provider/parent partnership helps to avoid misunderstandings and problems in the future. Most communication between parents and providers will take place when the parent brings and picks up his/her child. These day-to-day encounters are the most consistent times for ongoing and informal communication. Parents tend to be more relaxed in the afternoon when they picked up their children. This may be the best time to discuss a concern, ask a question, share highlights of the day or suggest a proposed change. Mornings tend to be a busy time for parents with a tight schedule.



The following is a list of ideas and activities to involve parents in your program and to encourage communication between the parent and the provider:

- Have each parent complete a resource questionnaire listing any talents, abilities, hobbies or special interest. This might include sharing a musical instrument, a cooking experience or an occupation. Parents may also volunteer time to type, to bake special treats or to assist on a fundraising project.
- Prepare a monthly newsletter to inform parents on what has been happening in each of the classrooms by listing field trips and special events. It can include parent reminders, new policies or other information.
- Plan a fall parent program to introduce parents to your program for the coming school year. Begin with a potluck dinner followed by a speaker, slide presentation or a discussion on a current topic. Plan to have the parents visit their child's classroom and meet the teachers. The teacher could discuss the classroom goals, daily schedule, classroom policies and be available to answer any questions.
- Plan an annual Christmas/holiday program where each classroom does a presentation for the parents.

*(cont'd pg. 11)*

## SURVIVING SPECIAL INVESTIGATIONS... A CONSULTANT'S PERSPECTIVE

Sharon Schleicher, Licensing Consultant  
Washtenaw County

Special investigations are probably the least favorite part of a licensing consultant's job; they are generally time consuming and frustrating for consultants, child care providers and parents. On the other hand, investigations can be very rewarding when the outcome results in children being protected from an unsafe environment.

### Challenges for the consultant include:

- **Complaints filed by anonymous or 2<sup>nd</sup> party sources:** Information received is often incomplete or considered hearsay. This limits the consultant's ability to do a thorough investigation because the (anonymous) reporting person cannot be interviewed.
- **Dealing with the provider's feelings of anxiety, anger, and defensiveness:** Relationships with providers may be strained during an investigation. Consultants cannot always be a provider's advocate.
- **Dealing with the parent's feelings of anger, hostility, and resistance:** Parents are often protective of their provider and reluctant to share information.
- **Keeping an open mind and withholding judgment until all information is received. Maintaining a professional and supporting role with a provider while investigating potential rule/act violations.**
- **Feelings of disbelief that a provider would violate licensing rules.**

- **Pressure to complete the investigation within the required time frame.**
- **Suspecting rule violations that cannot be confirmed by the evidence.**
- **Looking beyond the complaint at what else might be going on:** e.g. communication issues with parents, employees, personal problems, provider burnout.

### Re-framing how we look at complaints:

The purpose of daycare regulation is to protect vulnerable children who are cared for in child care homes and centers. Special investigations can be an opportunity to provide technical assistance and consultation to the program to improve the quality of care.

Positive outcomes of special investigations may include the following:

- Protection of children
- Improved communications between providers and consultant
- Improved professional skills such as interviewing, investigating and consulting
- Feeling good when the investigation is completed!

Working as partners with parents and providers, we can ensure that children are cared for properly – in an environment that nurtures each child emotionally, physically, intellectually, and socially.❖



## DEALING WITH AN ACCIDENT/INJURY...A PROVIDER'S PERSPECTIVE

Marilyn Strader, Cardinal's Nest Child Care Director

What is more stressful than having a Licensing Consultant come and tell you they have received a complaint about your program? What can you as a provider do to reduce the stress and alleviate the worry when an injury to a child occurs?

**DOCUMENT, DOCUMENT, AND DOCUMENT** some more. The best practice is to make sure that you have everything written down. Make sure that the staff involved fill out an incident report. The report should include: the date and time of the incident, the time the parent was called, and what the parent was told. The report should describe what happened in detail and what first aid was given to the child. If the injury requires medical attention, a DHS accident/injury form must be completed and sent to your licensing consultant.

Keep your licensing consultant informed about anything that you feel is important. We are on the same team and are all interested in the welfare of the children. If you have any questions or concerns, call your licensing consultant.

Ways to keep injuries to a minimum include the following:

- **SUPERVISE, SUPERVISE, and SUPERVISE** children at all times and in all places.
- Maintain required staff to child ratios.
- Conduct regular safety inspections on indoor and outdoor equipment.
- Assure that the equipment is age appropriate.
- Instruct all staff and children on the proper use of the equipment. ❖

## PROFESSIONAL DEVELOPMENT OPPORTUNITIES

16<sup>th</sup> Annual Child Care Resources  
Early Childhood Conference  
October 22, 2005  
KVCC Texas Township  
Kalamazoo, Michigan  
[robin@workfamilysolutions.com](mailto:robin@workfamilysolutions.com)

Annual Conference  
National Black Child Development Institute  
October 16-18, 2005  
Orlando, Florida  
(800) 556-22343  
[moreinfo@nbcidi.org](mailto:moreinfo@nbcidi.org) or [www.nbcidi.org](http://www.nbcidi.org)

Parenting Awareness Month Conferences  
Prevention Network  
October 20, 2005 – Marquette, Michigan  
November 7, 2005 – Lansing, Michigan  
(800) 968-4968  
[pamcampaign@preventionnetwork.org](mailto:pamcampaign@preventionnetwork.org)  
[www.preventionnetwork.org](http://www.preventionnetwork.org)

MiAEYC Annual Early Childhood Conference  
March 30-April 1, 2006  
Grand Rapids, Michigan  
(888) 666-2392  
[conference@MiAEYC.org](mailto:conference@MiAEYC.org)

Biennial Conference  
Michigan Association for Infant Mental Health  
October 23-25, 2005  
Ann Arbor, Michigan (734) 785-7700, Ext. 7194  
[dkahraman@guidance-center.org](mailto:dkahraman@guidance-center.org)  
[www.mia-aimh.msu.edu](http://www.mia-aimh.msu.edu)

NAEYC Annual Conference & Expo  
December 7-10, 2005  
Washington, D.C.  
<http://www.naeyc.org>

Region V Head Start Conference  
Region V Head Start Association and Mid-America  
Community Action Association  
October 24-28, 2005  
Columbus, Ohio  
(937) 435-1111  
[regionv@ohsai.org](mailto:regionv@ohsai.org)

Michigan Collaborative Early Childhood Conference  
Michigan Department of Education  
January 25-27, 2006  
Dearborn, Michigan  
(517) 336-9700  
[conference@MiAEYC.org](mailto:conference@MiAEYC.org)  
[www.MiAEYC.org](http://www.MiAEYC.org)

## ADDITIONAL TRAINING RESOURCES

MSU extension  
<http://fcs.msue.msu.edu>

High Scope Conference and Training Opportunities  
<http://highscope.org> or (734) 485-2000 ext. 234

Michigan 4-C Association  
[www.mi4c.org](http://www.mi4c.org)

Michigan Association for the Education of the Young Child  
[www.miaeyc.org](http://www.miaeyc.org)

## Parents &amp; Providers As Partners (cont'd from pg. 8)

- Conduct a parent-teacher conference to discuss the child's progress.
- Involve parents in helping with fundraising projects for your center.
- Plan field trips and have parents volunteer to drive, assist and help supervise the children on the trip.
- Set up a resource center for parents with information, books, and materials on parenting.
- Create a parent bulletin board displaying current articles, information, materials, and community resources on parenting or child development.

T. Berry Brazelton, in the book *Toddler and Parents*, tells us that in every case where the effects of day care have been studied, the positive impact on the parent-child relationship is directly related to the kind and amount of involvement of the parents in the child care setting.

**A partnership between providers and parents creates an environment that encourages the positive development of the child.❖**

**CHILD PROTECTIVE SERVICES CONTACT NUMBERS:**

County Name	Phone Number
Alcona	(989) 724-2100
Alger	(906) 387-4440
Allegan	(269) 673-7700
Alpena	(989) 354-7200
Antrim	(231) 533-8664
Arenac	(989) 846-5500
Baraga	(906) 353-4700
Barry	(269) 948-3200
Bay	(989) 895-2100
Benzie	(231) 882-1330
Berrien	(269) 934-2000
Branch	(517) 279-4200
Calhoun	(269) 966-1284
Cass	(269) 445-0200
Charlevoix	(231) 348-1600
Cheboygan	(231) 627-8500
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Delta	(906) 786-5394
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Emmet	(231) 348-1600
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Lenawee	(517) 264-6300
Livingston	(517) 548-0200
Luce	(906) 293-5144
Mackinac	(906) 643-9550
Macomb	(586) 412-6100
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Mecosta	(231) 796-4300
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Montcalm	(989) 831-8400
Montmorency	(989) 785-4218
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Ontonagon	(906) 884-4951
Osceola	(231) 796-4300
Oscoda	(989) 826-4000
Otsego	(989) 732-1702
Ottawa	(616) 394-7200
Presque Isle	(989) 734-2108
Roscommon	(989) 275-5107
Saginaw	(989) 758-1500
St. Clair	(810) 966-2000
St. Joseph	(269) 467-1200
Sanilac	(810) 648-4420
Schoolcraft	(906) 341-2114
Shiawassee	(989) 725-3200
Tuscola	(989) 673-9100
VanBuren	(269) 621-2800
Washtenaw	(734) 481-2000
Wayne	(313) 456-1000
Wexford	(231) 779-4500

DEPARTMENT OF HUMAN SERVICES  
OFFICE OF CHILDREN AND ADULT LICENSING  
7109 W. SAGINAW, 2ND FLOOR  
P.O. BOX 30650  
LANSING, MI 48909

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## CONSUMER PRODUCT SAFETY COMMISSION INFANT/CHILD PRODUCT RECALLS (not including toys)

The recalls below have been added since the last issue:

- **Graco Children's Products Inc. Recall of Duo Tandem and Certain MetroLite Strollers**
- **Simplicity Inc. Recall of Cribs**
- **Graco Children's Products Recall of Toddler Beds**
- **Delta Enterprise Corp. Recall to Repair Portable Cribs**
- **Big Save International Recall of Baby Walkers**

Details on these product recalls may be obtained on the Consumer Product Safety Commission's website: [www.cpsc.gov](http://www.cpsc.gov). To review the complete list see the Child Care Licensing Division website at: [www.michigan.gov/dhs](http://www.michigan.gov/dhs) (licensing/child day care)

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**Department of Human Services**

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